PEI Cancer Strategy

2016-2019

Let's make a difference

Prince Edward Island
CANADA
Health and Wellness

Health PEI
One Island Health System

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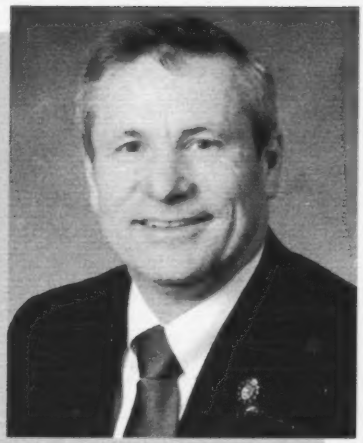
Message from the Minister of Health and Wellness



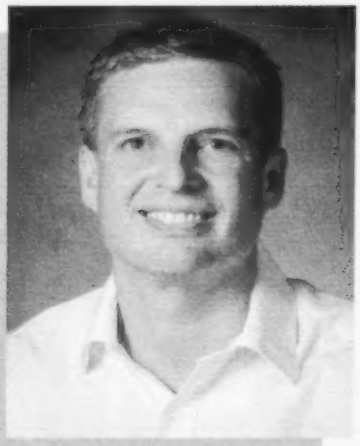
Cancer is a serious health issue that impacts the lives of many people, their families and our communities. Government is committed to reducing cancer, supporting those affected by the disease so they have the care they need and maintain a good quality of life during and after a cancer diagnosis. In 2004, a provincial cancer control strategy was released through the collaborative efforts of many stakeholders. "Partners Taking Action" guided planning and investments for the past decade and led to many achievements in the quality of care and services provided in our province.

The continuing efforts to reduce the burden of cancer in PEI shows Government's commitment to health protection, through policy such as the PEI Smoke-Free Places Act, and to improving access to programs and services that meet the needs of Islanders. We have advanced the prevention of late stage cancers through screening, with programs such as the launch of the PEI Colorectal Cancer Screening Program, and have enabled more Islanders to receive high quality care in our province through the expansion of the PEI Cancer Treatment Centre and addition of new drugs to the Provincial Drug Formulary. We continue to strive to provide supportive care for Islanders facing serious illness with the addition of provincial Cancer Patient Navigator Program and our continued commitment to the Provincial Integrated Palliative Care Program.

The PEI Cancer Strategy is an important and ambitious plan providing direction for the full cancer journey, from prevention and coordination of care to supportive and end-of-life care. Building on the strong foundation of committed health care providers, community partners and government leadership, I am confident that this strategy will enable the health system to continue moving forward in the areas of cancer prevention and care. Over the next three years, we will work with both partners in health and the community to achieve positive outcomes in the fight against cancer. I want to thank the Provincial Cancer Coordination Steering Committee for providing the plan that, I know, will benefit Islanders and strengthen healthcare services in PEI.

Honourable Robert L. Henderson
Minster of Health and Wellness

Message from the Chief Executive Officer, Health PEI



Cancer affects many people on Prince Edward Island. Providing access to care and services that meet the needs of our patients is paramount … from expanding cancer screening services to providing supportive care, cancer treatment, and symptom control, it is all very important work.

Services that support the cancer control continuum are embedded in many parts of our health system and the recommendations in the cancer strategy are key to improving coordination and support of patients along their cancer journey. Primary care services, screening programs, the PEI Cancer Treatment Centre and the Provincial Cancer Patient Navigator Program are providing excellent care to Islanders; however, there is more we can do. This strategic plan outlines key points of the cancer control continuum for us to focus on so that we can improve quality of care and to better align services to meet the needs of Islanders.

No family goes untouched by cancer. Government, healthcare providers, community groups, people with a cancer experience and the public at large are all stakeholders and partners in the fight against cancer.

As the PEI Cancer Strategy is implemented, we will work collaboratively to make a difference in this province. I look forward to progress and am committed to working together in this effort.

I would like to extend my sincere appreciation to the many contributors who helped develop this strategic plan, especially patients, survivors and caregivers.

Dr. Michael Mayne
Chief Executive Officer, Health PEI

Through the guidance of the PEI Cancer Strategy, Health PEI will be proceeding with a number of initiatives including:

- Strengthening our cancer screening programs so that more Islanders get screened to prevent cancers and increase survival through early diagnosis.
- Developing diagnostic pathways to reduce the time it takes to find cancers and start treatment.
- Enhancing the Cancer Patient Navigator Program to better meet the ongoing needs for information, emotional and practical supports of patients, especially during points in transition such as moving from treatment to survivorship.

A Decade of Cancer Control Milestones in PEI

2004
- Partners Taking Action: PEI Cancer Control Strategy released.
- PEI Smoke Free Places Act positions PEI as a leader in tobacco control in Canada.

2005
- Health Council of Canada names the PEI Integrated Palliative Care Program a "Best Practice" in Canada.

2007
- Human Papillomavirus (HPV) vaccine program launched for Grade 6 girls.
- PEI Cancer Trends 1980-2006 report released.

2008
- Digital Mammography investment to advance breast cancer screening in PEI.
- Expansion of clinical trials nursing role to full-time.
- Provincial Palliative Home Care Drug Program launched.

2009
- PEI Cancer Registry achieves 100% population-based staging for all cancers.
- PEI Cancer Control Strategy Progress Report released.
- Amendments to the PEI Smoke Free Places Act advances tobacco control in PEI including hospital grounds and vehicles with kids.
- Expansion of PEI Cancer Treatment Centre to include additional staff, a new CT Simulator and linear accelerator advancing the Radiation Oncology Program in PEI.

2010
- Provincial Cancer Patient Navigator Program begins and Nurse Practitioner with oncology specialty added to support collaborative practices.
- Provincial regulations on cosmetic pesticides.
- Get Screened PEI campaign launched by the Canadian Cancer Society in partnership with Health PEI and Public Health Agency of Canada.

2011
- PEI Colorectal Cancer Screening Program launched.
- Additional nursing position added to the staffing compliment of the QEH Pediatric Day Unit (Ambulatory/Oncology services).

2012
- PEI Cancer Trends 1980-2009 report released.
- Acute Care Integrated Palliative Care Pilot.

2013
- Provincial restrictions of youth using tanning beds.
- HPV Vaccine program expands to include Grade 6 boys.
- Catastrophic Drug Program launched.
- Child Life Specialist hired to support children and families coping with illness and loss.

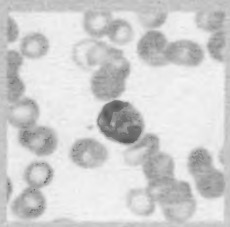
2014
- Provincial Cancer Coordination Steering Committee formed to develop, implement and evaluate new cancer strategy for PEI.
- Provincial Cancer Coordinator position announced to support the development of a new cancer strategy for PEI.
- New PEI Colorectal Cancer Screening Clinical Practice Guidelines.

Since 2004, there have been a number of drugs added to the Provincial Drug Formulary that cover 43 new cancer indications.

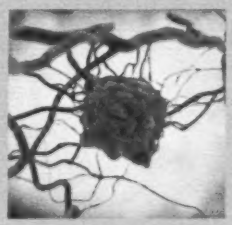
BACKGROUND

What is cancer?

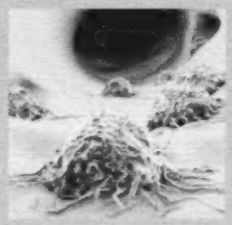
Cancer is not just one disease, but is a general term referring to over 100 different diseases. Our bodies are made up of millions of cells. Genes inside each cell order it to grow, work, reproduce and die. Normally, our cells obey these orders and we remain healthy.



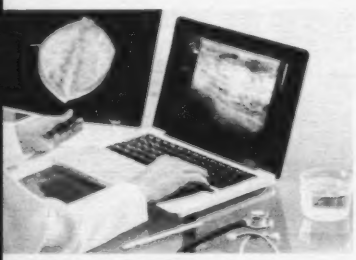
When the cell instructions get mixed up, the cells can form lumps or tumours or spread through the bloodstream to other parts of the body. These mixed up cells can become cancer.



Cancers are named after the part of the body where they start. When the cancer cells spread to other parts of the body this is called metastases. For example, cancer that starts in the bladder but spreads to the lung is called bladder cancer with lung metastases.[1]



Research into the different types of cancer continues to advance how cancer is prevented, detected, treated and in some cases managed. Each cancer diagnosis requires a care plan that is built on the knowledge of the particular disease and stage.



Screening matters. Cancer can be found very early or even be prevented through regular screening. Breast, colorectal and cervical cancer screening programs are now available in PEI.

Abnormal cervical and colon cells can be found before they become cancer and a small growth in the women's breasts can be found at a time when can be easily treated. It is important to know what screening is right for you.

More than 1 in 40 Islanders have had a personal cancer experience between 1999 and 2008.

Darlene CHANDLER - BREAST CANCER SURVIVOR

The hardest part of my journey was to tell my family and friends that I have breast cancer. My father and mother both died of cancer at age 57 and 59 respectively. I was 56 years old when I received my diagnosis of stage 2, grade 3 breast cancer in April 2014. One really looks at one's own life when facing a cancer diagnosis.

I have always been one to deal with any health issues on my own. I knew I could not handle such a diagnosis alone. Once I told my friends and family, I was amazed by the support I received.

I have also received tremendous support through the services offered by the Canadian Cancer Society and the PEI Cancer Treatment Centre. I have participated in a number of programs offered such as Reach to Recovery, Encore and Look Good, Feel Better. I have also used the support services of the physiotherapist specializing in Lymphedema prevention and treatment as well as the Cancer Patient Navigator. Their ongoing support is so greatly appreciated. It takes a special person to work in oncology and it never fails to amaze me how wonderful and encouraging the staff are. Their dedication to their job helps ensure patients' needs are continuously met even if the patients are not aware of the needs themselves.

The part of my journey that I wish to share is to provide encouragement to others when their cancer diagnosis is originally received. The right attitude coupled with a good support system from the onset, goes a long way in one's journey. Don't be afraid of the word CANCER and don't be afraid to ask questions. Once you share your concerns with friends, family, co-workers and caregivers, you will find a wonderful support system. This support will provide you with the courage and strength to be pro-active in your own cancer journey. Be open to learn about and participate in the various programs offered. Don't let cancer define who you are, but rather discover who you really are while on this crazy journey.

For more information on programs and services for patients and families contact the Cancer Patient Navigator

1-877-511-5177

BACKGROUND

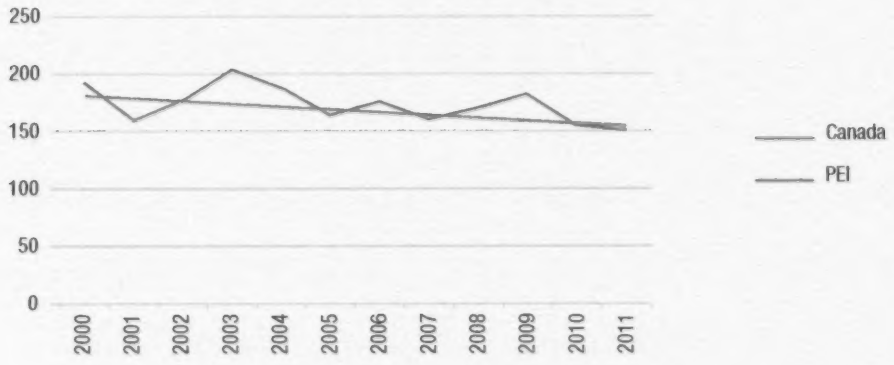
Incidence

The 2015 release of the Canadian Cancer Statistics estimated that 910 residents of PEI (510 males; 400 females) were diagnosed with cancer in 2015 and an estimated 380 residents (190 males; 190 females) would die from the disease[2]. The 910 new cancer cases estimated in PEI for 2015 are more than twice as many cases than were diagnosed in 1980 (425)[3]. This is largely due to an increase in population as well as the growing aging population in the province. The highest incidences of cancers are projected to continue to be in all Atlantic Canadian Provinces.

Mortality

Cancer continues to be the leading cause of death in PEI and Canada. In 2011, cancer was the leading cause of deaths in PEI (25.9%), followed by deaths due heart disease (20.3%) and stroke (5.9%)[4]. Notably, it is important to recognize that the mortality rate due to cancer has been declining in Canada and PEI since 2000. Over the past decade, the mortality rate in PEI due to cancer has stayed comparable to the national rate *(figure 1)*.

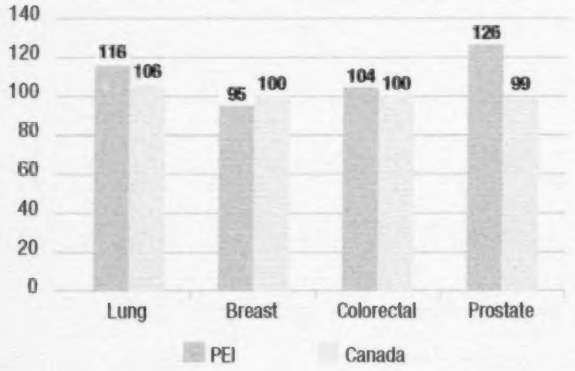
Figure 1: Cancer Mortality Rates; age-standardized; both sexes (per 100,000)[4]



Most Common Cancers

Of the many different new cancer cases diagnosed, over half are one of four types:

Figure 2: Estimated age-standardized incidence rates in 2015 of Lung, Breast, Colorectal and Prostate cancers (per 100,000)[2]



It was estimated that in 2015 the most common cancers were also the leading causes of cancer deaths in PEI. Lung cancer is the leading cause of cancer death for both men (60 deaths) and women (50 deaths) in PEI. Death from colorectal and prostate cancers follow lung cancer in men and breast and colorectal cancers follow lung cancer in women.

Survival

Key components of cancer control include screening, early detection and the use of evidence-informed treatments which aim to improve the outcome of a cancer diagnosis. While there are more cancers being diagnosed in Canada, there are also more Canadians surviving cancer than ever before. The five-year relative survival in Canada for all cancers combined has improved from 55.5% for those diagnosed between 1992 and 1994 to 62.8% for those diagnosed between 2006 and 2008[2]. The trend is positive in that the rate continues to increase, and with regular monitoring more information will be able to show this improvement in survival rates.

As reported in the PEI Cancer Trends reports, the five-year relative survival rate (RSR) in PEI are continually lower than the national average. The PEI five-year age-standardized RSR for people diagnosed between 2004 and 2006 was 59.4%. Survival rates are impacted by multiple different factors including the types and stages of cancer, participation in cancer screening programs and treatment and follow-up care. Work to increase the number of Islanders who live long and well after a cancer diagnosis is rooted in all efforts across the cancer control continuum and is the spirit of the vision of the PEI Cancer Strategy.

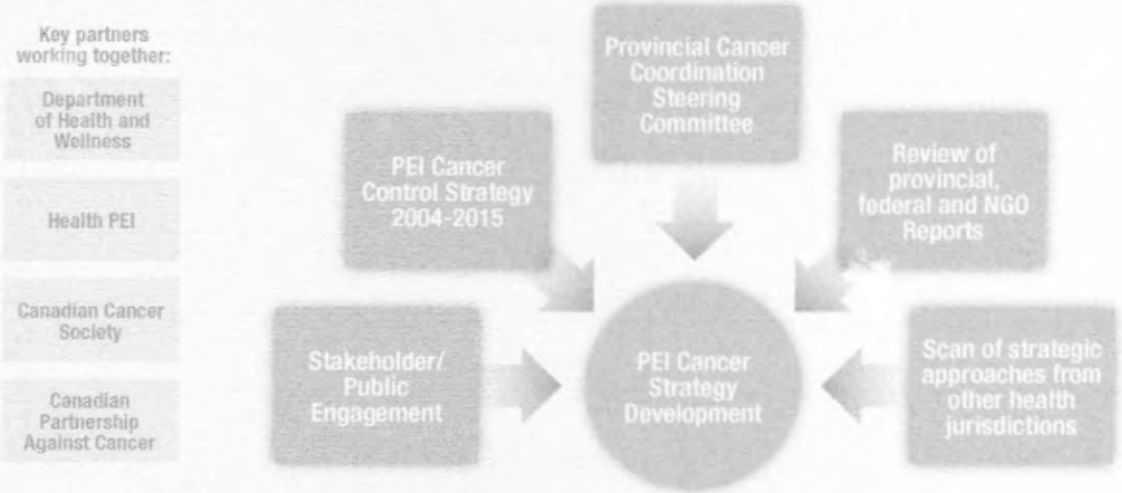
The Burden of Cancer in PEI

Beyond the incidence and mortality statistics of cancer, the full scope of the burden of cancer includes the financial and emotional toll of a diagnosis on the individual, their families and caregivers. Measuring and addressing the burden of cancer for those diagnosed, their families and caregivers, as well as the increasing demands on the health system is critical.[3] The 2015 Canadian Cancer Statistics projected that the burden of cancer in Canada to continue to grow over the next twenty years. With more people living in Canada and with an aging population, the number of people diagnosed with cancer is expected to continue to increase. To reduce the number of new cancers in PEI and the impact of cancer on all Islanders, it is important to plan now and prepare for the future.

STRATEGY DEVELOPMENT

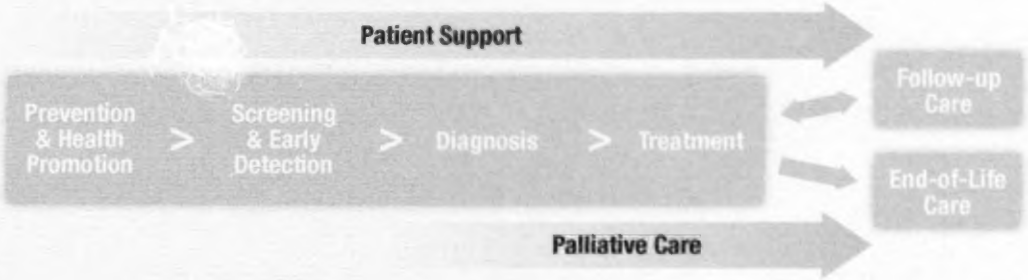
All partners need to work effectively together to make a difference. In early 2014 the Department of Health and Wellness and Health PEI established the Provincial Cancer Coordination Steering Committee (the Steering Committee) with the mandate to develop, implement and monitor a three-year strategic plan for cancer control in PEI. The Steering Committee has representation from across the cancer control continuum and is supported by an implementation and monitoring model. (see pages 14 & 15)

Development of this strategy was guided by information from many sources and builds on the achievements from the previous cancer strategy.


Key partners working together:
Department of Health and Wellness
Health PEI
Canadian Cancer Society
Canadian Partnership Against Cancer
Provincial Cancer Coordination Steering Committee
PEI Cancer Control Strategy 2004-2015
Review of provincial, federal and NGO Reports
Stakeholder/ Public Engagement
PEI Cancer Strategy Development
Scan of strategic approaches from other health jurisdictions

The PEI Cancer Strategy 2016-2019 offers recommendations that span the cancer control continuum, supports the residents of PEI, is based on the latest scientific evidence and focus on improving quality of care,

Cancer Control Continuum



STRATEGIC PLAN

The PEI Cancer Strategy 2016-2019 has been developed through the advice, expertise and input of many people. Led by Provincial Cancer Coordination Steering Committee, this strategy is guided by principles and strives to be person-centred, collaborative, sustainable, innovative and coordinated. Oversight of this strategy will be the responsibility of the Steering Committee with ongoing support from various stakeholders, including patients, public, community, government and healthcare professionals.

VISION *Reduce cancer and its impact on all Islanders.*

MISSION *Working together to lead improvements and changes that value people, quality and evidence, so all Islanders can live healthier lives and receive high quality cancer care.*

GOALS *The PEI Cancer Strategy will work to:*

- *Reduce cancer incidence, mortality and morbidity.*
- *Enhance the quality of life of individuals at all stages of the cancer continuum.*
- *Optimize resources and processes to sustain the PEI cancer care system.*

	PRIORITY AREAS	OBJECTIVES
OVERARCHING PRIORITIES	**Coordination of Cancer Control in PEI**	Improve the coordination of care across the cancer control continuum
		Establish an accountable governance and monitoring framework
	Cancer Research and Surveillance	Increase capacity to participate in research and monitor cancer trends
CANCER CONTROL CONTINUUM PRIORITIES	**Prevention and Health Promotion**	Improve prevention and health promotion efforts to reduce the incidence of cancer
	Screening and Early Detection	Improve access to screening and early detection to prevent late stage diagnosis
		Increase participation in cancer screening
	Diagnosis	Reduce wait time and transit time from initial suspicion to diagnosis
	Treatment	Improve cancer patient treatment outcomes in the areas of mortality, morbidity and quality of life
	Patient Support and Follow-up Care	Embed a person-centred approach across the cancer control continuum
		Ensure patients and families have access to the information, services and care they need in a timely manner
	Palliative and End-of-Life Care	Implement advance care planning across the cancer control continuum
		Increase access to a fully integrated provincial palliative care program

RECOMMENDED ACTIONS

The Provincial Cancer Coordination Steering Committee has made recommended actions for each objective of the strategic plan. This high level plan is a framework for cancer prevention and care which will progress with dedicated coordination and leadership. The Steering Committee will monitor success and work to resolve challenges in an effort to achieve the goals and vision of this strategic plan.

OBJECTIVE 1:
IMPROVE THE COORDINATION OF CARE ACROSS THE CANCER CONTROL CONTINUUM

Recommended Actions:

- Develop a coordinated and sustainable approach to cancer control in PEI
- Continue to improve the quality and efficiency of healthcare services provided to Islanders experiencing cancer.

OBJECTIVE 2:
ESTABLISH A GOVERNANCE AND MONITORING FRAMEWORK

Recommended Actions:

- Implement an accountability framework to guide continued progress on cancer control in PEI.
- Under the guidance of the Provincial Cancer Coordination Steering Committee, monitor and report progress, challenges and new opportunities to achieve the recommendations of the PEI Cancer Strategy 2016-2019.

OBJECTIVE 3:
INCREASE CAPACITY TO PARTICIPATE IN RESEARCH AND MONITOR CANCER TRENDS

Recommended Actions:

- Strengthen cancer surveillance capacity (e.g. epidemiologist) to analyze and make recommendations regarding cancer trends in PEI.
- Increase healthcare provider participation and patient enrollment in clinical trials.
- Engage in outcomes research, including analyses of system performance indicators, treatment toxicity, disease free survival and overall survival.
- Continue to invest in research and measurement of health behaviors and attitudes in PEI.

OBJECTIVE 4:
IMPROVE PREVENTION AND HEALTH PROMOTION EFFORTS TO REDUCE NEW CASES OF CANCER

Recommended Actions

Overarching:

- Support implementation of the PEI Wellness Strategy.

Tobacco Control:

- Continue to support the prevention and cessation of tobacco use among youth and young adults.
- Enhance the PEI Smoke-free Places Act and the Sales and Access Act to address key tobacco control priorities.
- Ensure that those who want to quit smoking have access to services and supports that meet their needs.

Alcohol Reduction:

- Support the development and implementation of a PEI alcohol reduction strategy.

RECOMMENDED ACTIONS

Obesity Reduction:

- Work with healthcare providers, community partners and leaders to prevent and reduce the number of people living in PEI who are obese.

Immunization and Prevention of Communicable Disease:

- Continue efforts to maintain and grow the number of girls and boys receiving the HPV vaccine through the school-based program in PEI.
- Continue to implement measures to prevent new cases of hepatitis B and C and slow progression of these diseases.

Reduction of Exposure to Environmental and Occupational Carcinogens:

- Monitor and enforce legislation to protect youth from artificial UV radiation and encourage all Islanders to avoid excess sun exposure.
- Monitor and evaluate evidence of the impact of environmental and occupational carcinogens on cancer incidence.

OBJECTIVE 5:
IMPROVE ACCESS TO SCREENING AND EARLY DETECTION TO PREVENT LATE STAGE DIAGNOSIS

Recommended Actions:

- Ensure clinical practice guidelines for cancer screening are based on the latest science, implemented fully and regularly reviewed.
- Provide information to guide men and clinicians in managing the risks and detection of prostate cancer.
- Monitor the growing evidence and identify what is needed to prepare for lung cancer screening of those who are of high risk in PEI.

OBJECTIVE 6:
IMPROVE PARTICIPATION IN CANCER SCREENING

Recommended Actions:

- Increase participation in breast, colorectal and cervical cancer screening through public awareness initiatives, increased recruitment and improved public access to programs and services.

OBJECTIVE 7:
REDUCE THE TIME FROM INITIAL SUSPICION TO DIAGNOSIS

Recommended Actions:

- Establish the best process to rapidly and accurately diagnose the four most frequent cancers in PEI: Lung, breast, colorectal and prostate.

Charles **KELLIHER**
- COLORECTAL CANCER SURVIVOR

Fourteen years have passed since my life was turned upside down when I was told I had colorectal cancer.

As a colorectal cancer survivor, I encourage you to take advantage of the early detection screening program. The test is easily done in the comfort of your own home. Colorectal cancer is preventable, detectable, treatable and beatable. Do yourself and your loved ones a huge favor.

By participating in the screening processes, you many never have to hear the words, "you have colorectal cancer." Don't wait, don't hesitate! Get screened now.

For more information on the PEI Colorectal Cancer Screening Program call 1-888-561-2233 or see www.healthpei.ca/colorectal

RECOMMENDED ACTIONS

- Support healthcare providers in using national guidelines to diagnose cancer, including supporting Choosing Wisely Canada, an initiative of the Canadian Medical Association that provides physicians the latest evidence on how to assess symptoms and health risk factors and provide appropriate care.

- Expand the provincial Cancer Patient Navigation Program to ensure Islanders diagnosed with cancer and their families have the support they need along their cancer journey.

OBJECTIVE 8:
IMPROVE CANCER PATIENT TREATMENT OUTCOMES TO LESSEN ILLNESS AND DEATH AND IMPROVE QUALITY OF LIFE

Recommended Actions:

- Ensure physician and other clinical resources are available to meet the cancer needs of PEI's population.

- Establish standardized care plans beginning with the four most frequent cancers in PEI: Lung, breast, colorectal and prostate.

- Work with the Provincial Drugs and Therapeutics Committee to identify and prioritize the expansion of coverage for medications needed to treat cancers.

- Ensure oncology pharmacy resources are available to support cancer care in PEI.

- Expand the Catastrophic Drug Program to better meet the needs of Islanders diagnosed with cancer.

- Provide comprehensive medical and radiation oncology services to patients in PEI, so fewer Islanders are required to go off-Island for cancer care.

- Advance standardized reporting for medical procedures and diagnosis to foster best practices. This is done with the aim to improve the quality of care of Island cancer patients.

OBJECTIVE 9:
APPLY A PERSON-CENTRED APPROACH ACROSS THE CANCER CONTROL CONTINUUM

Recommended Actions:

- Identify the full spectrum of needs of people diagnosed with cancer, their families and caregivers during the various times of transition along their cancer journey.

- Ensure the needs and wishes of the person who has been diagnosed with cancer are integrated into care planning and supported by a multi-disciplinary healthcare provider team.

- Ensure care plans include information on long term effects of treatment so cancer patients, and their families, can make informed decisions about treatment.

OBJECTIVE 10:
ENSURE PATIENTS AND FAMILIES HAVE ACCESS TO THE INFORMATION, SERVICES AND CARE THEY NEED IN A TIMELY MANNER

Recommended Actions:

- Ensure standardized follow-up plans are developed and shared with the patient, clinical team, their primary care clinician and supportive services.

- Identify people diagnosed with cancer who do not have a primary care provider. Develop and implement a plan to support them during and after active cancer treatment.

- Begin integration of Electronic Health Records across the cancer control continuum.

- Support cancer patients along their cancer journey by expanding screening for distress and distress management services.

- Collaborate with community partners to further enhance support and programs for people living with a cancer diagnosis.

- Continue to support efforts to recognize the important role of caregivers and to decrease their financial burden in PEI.

RECOMMENDED ACTIONS

OBJECTIVE 11:
IMPLEMENT ADVANCE CARE PLANNING ACROSS THE CANCER CONTROL CONTINUUM

Recommended Actions:
Through leadership and champions in the healthcare system and community, information, tools, processes and policy will be developed to:

- Increase the number of people living in PEI with advanced care plans.
- Increase the number of healthcare providers trained and who are confident in forming and discussing advanced care plans.
- Increase the ability to respond to and support the advanced care plans of people diagnosed with cancer in PEI.

OBJECTIVE 12:
INCREASE ACCESS TO A FULLY INTEGRATED PROVINCIAL PALLIATIVE CARE PROGRAM

Recommended Actions:

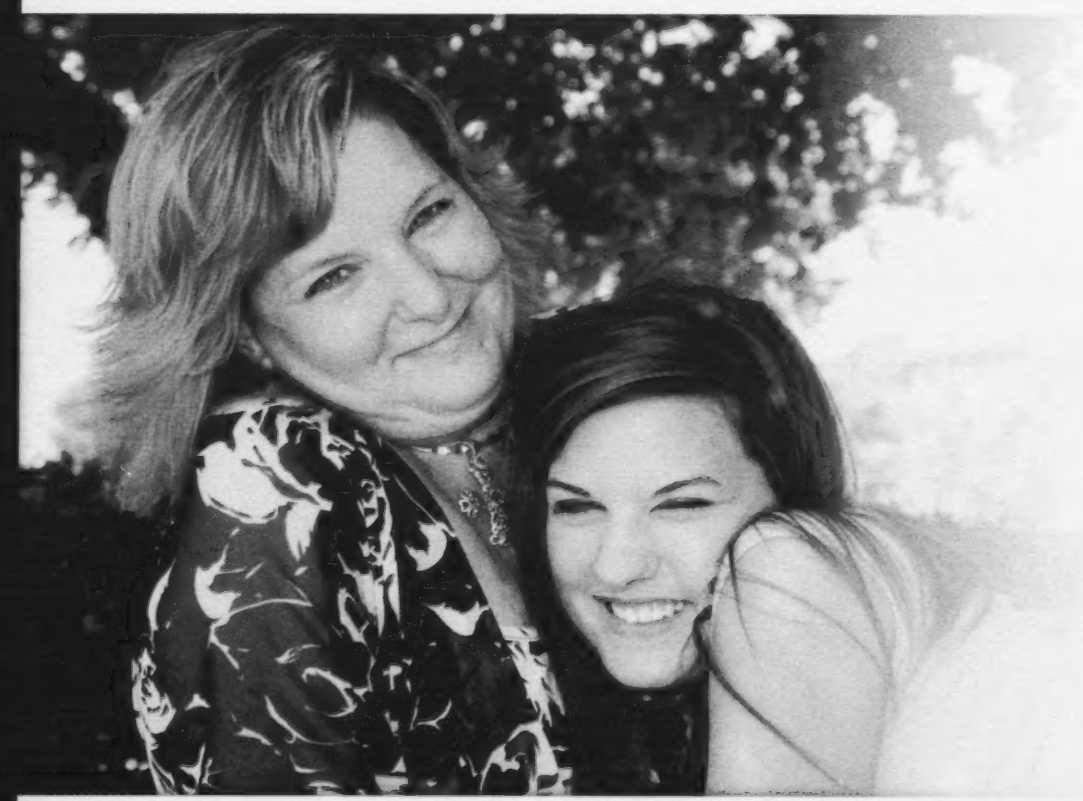
- Support the development and implementation of a provincial plan for palliative and end-of-life care in PEI.
- Ensure patients have timely access to palliative care services, wherever they choose to receive care.
- Ensure healthcare professionals receive training in palliative and end-of-life care to enhance skills and improve the quality of service provided.
- Expand access to 24 hour palliative and end-of-life services.
- Continue to commit and enhance the Provincial Palliative Home Care Drug Program to reduce the financial burden for Islanders near the end of life.
- Enhance information and emotional support during the grieving process for families and caregivers.

SPECIAL FOCUS

Improving Outcomes of Lung, Breast, Colorectal and Prostate Cancers in PEI.

Over half of all the estimated new cases of cancer diagnosed in PEI in 2015 were related to four types: **lung, breast, colorectal and prostate cancers**. This is a common trend throughout Canada which can be related to an aging population and lifestyle risk factors such as smoking, obesity and alcohol use.

The Provincial Cancer Coordination Steering Committee will establish action groups related to these cancers with representation of clinical and administrative staff as well as patient and family advisors. In early 2015, the Lung and Breast Cancer Action Groups were formed and work has already begun in priority setting, identifying barriers and developing plans to improve.



MOVING FORWARD

The achievements and lessons learned through the previous strategy, along with the expertise of the stakeholders engaged during development of the plan, provide a solid foundation for the PEI Cancer Strategy 2016-2019. As we move into the phase of action with this plan, it is important to acknowledge that great work is already begun through commitments from government.

To lay the foundation for success, several initiatives have already been completed in support of the strategy and the health and wellbeing of Islanders:

- **Release of the new PEI Wellness Strategy**
- **Updated legislation to improve tobacco control for electronic cigarettes and flavoured tobacco in PEI**
- **Opening of the new Palliative Care Centre in Charlottetown**
- **Hiring of a Provincial Cancer Coordinator, an Oncology Pharmacist and a Cancer Surveillance Epidemiologist**
- **Launch of drug treatment coverage for people diagnosed with Hepatitis C**
- **Medical Advisor role created to support the implementation of the strategy**

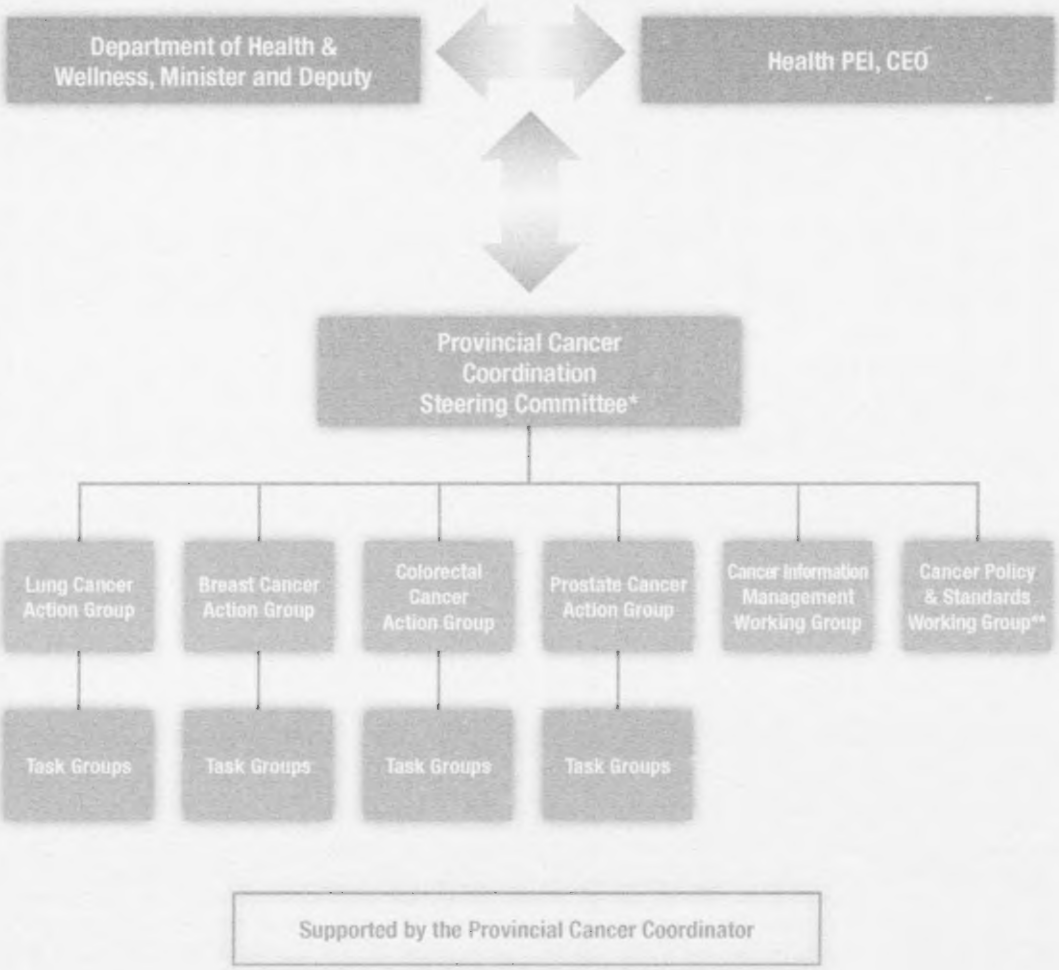
Going forward the Provincial Cancer Coordination Steering Committee will oversee the implementation of this strategy. This includes the direction and leadership on priority planning and advice on resources needed to be successful in reducing cancer in PEI. As each recommended action is considered and addressed, the Steering Committee will work with the public, healthcare professionals, government and community partners.

Notably, the Steering Committee will involve Islanders who are current cancer patients, cancer survivors, their families and caregivers in committees and action groups and will continue to seek input and share progress. This first-hand experience, knowledge and advice will be a great benefit to decision making and priority setting so that efforts better meet the needs of those who are on a cancer journey in PEI.

Cancer has and will continue to affect many Islanders. A successful future in the fight against cancer depends on improving the health and wellness of all of us and building a stronger healthcare system now so that we can reduce cancer and its impact on all Islanders.

Let's make a difference together.

PEI CANCER STRATEGY IMPLEMENTATION AND MONITORING STRUCTURE


Department of Health & Wellness, Minister and Deputy
Health PEI, CEO
Provincial Cancer Coordination Steering Committee*
Lung Cancer Action Group
Breast Cancer Action Group
Colorectal Cancer Action Group
Prostate Cancer Action Group
Cancer Information Management Working Group
Cancer Policy & Standards Working Group**
Task Groups
Task Groups
Task Groups
Task Groups
Supported by the Provincial Cancer Coordinator

* Sponsored by Health PEI and leading the priority setting, planning and reporting of the PEI Cancer Strategy 2016-2019.
** Working Groups will work closely with Action Groups providing support for evidence-informed decision making and planning.

PROVINCIAL CANCER COORDINATION STEERING COMMITTEE MEMBERSHIP

Committee Chair & Radiation Oncologist	Dr. Larry Pan
Executive Director, Community Health	Deborah Bradley
Provincial Chief Nursing Officer & Executive Director, Laboratory Services	Brenda Worth
Director, Hospital Services QEH	Kelley Rayner
Chronic Disease Epidemiologist	Dr. Carol McClure
Medical Oncologist	Dr. Philip Champion
Palliative Care Physician Lead	Dr. Mireille Lecours
Deputy Chief Public Health Officer	Dr. David Sabapathy
Director, Primary Care & Chronic Disease	Marilyn Barrett
Executive Director, Canadian Cancer Society-PEI Division	Lori Barker
Ad Hoc: Director, Strategy and Performance	Jennifer LaRosa
Support: Provincial Cancer Coordinator	Marla Delaney

Special thanks to past members Dr. Ethan Laukkanen, Dr. Katherine Burleigh, Una Hassenstein and Jane Farquharson.

References :

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[2] Canadian Cancer Statistics 2015: Toronto, ON: Canadian Cancer Society; 2015.

[3] Prince Edward Island Cancer Trends: 1980-2009. Charlottetown, PEI: Chief Public Health Office; 2012.

[4] Statistics Canada, CANSIM: www.statcan.gc.ca

[5] Public Health Agency of Canada: Chronic Disease InfoBase. www.infobase.phac-aspc.gc.ca

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Prince Edward Island
CANADA
Health and Wellness

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